FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

STREET ADDRESS

CITY-SI-ZIP

PROFIT CORPORATION ANNUAL REPORT 1996 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS								
DOCU 1. Corporatio	MENT #	P95000	0094364 (3)					
	RN, INC.		` .			(120 (162) 110 hái ar anh a san a san a	Ta lih đána cá nh bi bas nihi	i Assis Bibs shes
Principal Place			Maiing Address			e saarraar tie itriet dielt alltit taliff i) Mill Maile 1866 Mill Mill Mill 1869 1869 1	BIDE BIBE 1881
4964 S.E. M/ Stuart FL (ARINER VILLAGE L 34997	ANE	4964 S.E. MARINER VILL STUART FL 34997	AGE LANE				
						3. Date Incorporated or Qualified 12/11/1995	3a. Date of Last R	leport
	lace o Business	c+	28. Mailing Address	0'54	C+	4. FEI Number 65-06 285/	<i>t</i> .	Applied For
21 21 1 Suite, Apt.				zida St.		63-002037	<u>—————————————————————————————————————</u>	Not Applicable
22			27			5. Certificate of Status Desired		Additional Required
City & State		L	City & State 28 STUART	71.		Election Campaign Financing Trust Fund Contribution		May Be
Zip 3 4 6	194 25	Country MARTIN	^{Zip} 34994	Country 30 /1 /3	nt:N	8. This corporation has liability for it		199.032,
27 0 1		Address of Current	<u> </u>	30 / 1/7	44.10	Florida Statutes Yes 10. Name and Address of New R	□ No legistered Agent	
DONATO, BERNARDO JR. 2862 MARIPOSA CIRCLE PALM CITY FL 34990				82 83	Name Street Add	ress (P.O. Box Number is Not Acceptable)		
				84	City		FL 85 Z	p Code
11. Pursuant i or register familiar wi	to the provisions o red agent, or both, th, and accept the	f Sections 607.0502 a in the State of Florida obligations of Sectio	and 607.1508, Florida Statutes Such change was authorized n 607.0505, Florida Statutes.	the above- by the corp	named corpo oration's boa	oration submits this statement for the pur ard of directors. I hereby accept the appx	oose of changing its r	registered office I agent. I am
SIGNATURE .	_							
12.	Signature typed or printe	ed name of registered agent an OFFICERS AND		: Registered Ager	nt signature requir	ed when reinstating: ADDITIONS/CHANGES TO OFFI	DATE POEDO AND DIDEOTO	NDO IN 40
TITLE	PTD	0111021107110	DELETE	1. 1 TITLE		ADDITIONS/OFFANGES TO OFFA	Change	Addition
NAME	DONATO, BE	ernardo Jr.		1.2 NAME	ļ			•
STREET ADDRESS	2862 MARIPO			1.3 STREET	ADDRESS			
CITY-ST-ZIP	PALM CITY FL 34990				1-ZIP			
TOLE	VSD		DELETE	2. 1 TITLE 22 NAME			☐ Change	Addition
NAME CIRCLI ADODESIS	CASTAGNA, ELIZABETH							
STREET ADDRESS CITY-ST-ZIP					ADDRESS			
TITLE	STORTI IL C	74301	DELETE	2.4 City - S 3. 1 Title	1 - 241		Change	Addition
NAME			<u> </u>	3.2 NAME			L) Grange	C) Addition
STREET ADDRESS				3.3. STREE	ADDRESS			
CrTY-ST-ZIP				3.4 CITY - S				
TITLE			☐ DELETE	4. 1 TITLE			☐ Change	Addition
NAME				4.2 NAME	ŀ			
STREET ADDRESS				4.3 STREET	ADDRESS			
CITY-ST-ZIP			□ DC: trr	4.4 CITY - S	T-ZIP			
TITLE			☐ DELETE	5 1 TITLE			☐ Change	Addition
NAME STREET ADDRESS				5.2 NAME	•000000			
CITY - ST- ZIP				5 3 STREET				
TITLE	 		☐ DELE1E	5.4 CITY-S 6. 1 TITLE	1-21r		Change	Addition
NAME				6.2 NAME			٠٠٠٠٠ وسيا	

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, of on an attachment with an address.

6.3 STREET ADDRESS